



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Hoo	Kenneth	G. K.	808-529-7300
MAILING ADDRESS (Street)			FAX
P.O. Box 2800			808-524-8293
(City)	(State)	(Zip Code)	
Honolulu	HI	96803-2800	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
G.A. MORRIS, INC.			808-531-4551
MAILING ADDRESS (Street)			FAX
222 South Vineyard Street, Suite 401			808-533-4601
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	

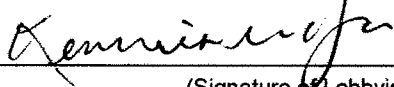
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaii Liquor Wholesalers Association			808-529-7300
MAILING ADDRESS (Street)			FAX
500 Ala Moana Boulevard, 5 Waterfront Plaza, 4th Floor			808-524-8293
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Melody Butay Dacanay			808-531-4551
MAILING ADDRESS (Street)			FAX
222 South Vineyard Street, Suite 401			808-533-4601
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1-16-07

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

Kenneth G. K. Hoo

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Secretary for Hawaii Liquor Wholesalers Association

NAME OF ORGANIZATION (if applicable)

Hawaii Liquor Wholesalers Association

TELEPHONE

808-529-7300

MAILING ADDRESS (Street)

500 Ala Moana Boulevard, 5 Waterfront Plaza, 4th Floor

FAX

808-524-8293

(City)

Honolulu

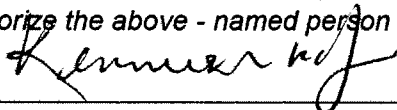
(State)

HI

(Zip Code)

96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1-16-07

(Date)